

Mary C. Mayhew, Commissioner

Department of Health and Human Services Licensing and Regulatory Services - MMMP 41 Anthony Avenue # 11 State House Station Augusta, Maine 04333

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Public Petition Maine Medical Use of Marijuana Program

PETITIONS MUST BE FILED WITH THE DIVISION OF LICENSING AND REGULATORY SERVICES ATTENTION - MMMP

Adding debilitating medical conditions. In accordance with 22 M.R.S. §2422 (2) (D), the Department has adopted rules regarding the consideration of petitions to add medical conditions or diseases to the existing list of debilitating medical conditions. Pursuant to 10-144 CMR, Ch. 122, the Department shall provide an opportunity for a public hearing to comment on petitions. After a hearing, the Commissioner shall approve or deny a petition within 180 days of its submission.

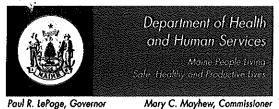
Public petitions adding debilitating medical conditions must comply with 10-144 CMR, Ch. 122, Sec. 3.2 et. al., including the following:

- The petition must clearly identify the specific debilitating disease or medical condition.
- The petition must include reputable scientific evidence that supports the use of marijuana for the treatment of the disease or medical condition.
- The petition must include sufficient evidence to demonstrate that the medical use of marijuana would benefit qualifying patients with the disease or medical condition.
- The petition must include evidence that marijuana therapy is sufficiently effective to warrant its use.

Section 1. Petitioner Information	
Name (first, middle initial, last) Stephen L Blythe, D.O.	
Mailing Address (where mail is received) 147 Station Rd (city, state, zip code) Jonesboro, ME 04648	Telephone: (207) 271 - 1101 Email address: sblythe@tds.net
Signature:	Date: 5-25-14

Section 2. Debilitating Disease or Medical Condition (one form per disease or condition)		
Name of Debilitating Disease or Medical Condition:		
Obsessive - Compulsive Disorder (OCD)		

	CHON 3. Reputable Scientific Evidence – Please provide a list of citations to reputable scientific ence and attach copies of referenced materials to this petition. If additional space is needed, se attach another Page 2 of this petition.
•	1. American Journal of Psychiatry 165:4, April 2008 Letter reviewing beneficial treatment of
•	OCD with prescription medication dronabinal. (THC)
•	2. Progress in Neuropsychopharmacology and Biological Psychiatry abstract from Madline.
•	mouse model of OCD demonstrates that a CB-1 receptor agonist (which works as does THC
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•	stops the obsessive behavior.
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	FOR OFFICE USE ONLY
te Petiti	ion Received: 5.29.2014 Date Decision Due (180 days from date received): 11.25.2014
tition .	Anneous
	Petition Denied: (See attached written Decision)
Comm	nissioner Signature:



Mary C. Mayhew, Commissioner

Department of Health and Human Services Commissioner's Office 221 State Street 11 State House Station Augusta, Maine 04333-0011 Tel.: (207) 287-3707; Fax (207) 287-3005 TTY Users: Dial 711 (Maine Relay)

PUBLIC PETITION MAINE MEDICAL USE OF MARIJUANA PROGRAM

FINAL DECISION

This is the Department of Health and Human Services' Final Decision.

The following evidence has been reviewed:

- Public Petition, dated May 25, 2014, to add Obsessive-Compulsive Disorder (OCD) to the list of debilitating conditions for the medical use of marijuana
- Letter from Stephen Blythe, D.O., dated May 25, 2014
- Improvement in Refractory Obsessive Compulsive Disorder with Dronabinol, Letter to the Editor, Schindler et al; American Journal of Psychiatry, April 2008
- Facilitation of CBI Receptor-Mediated Neurotransmission Decreases Marble Burying Behavior in Mice, Gomes et al, Progress in Neuro-Psychopharmacology & Biological *Psychiatry 35* (2011)
- Marijuana From Mom: Mother says Drug Helps Son cope with Sever OCD, ABC News article, July 23, 2010
- Case Report: Medical Marijuana for OCD, Stephen L. Blythe, Family Physician and Nutritionist, August 3, 2014
- Letter from Nicole R. Balzano, dated August 11, 2014
- Letter from Ellen S. Hebert, dated August 16, 2014
- E-mail message from Eli Edgecomb, sent August 9. 2014, 9:15 AM
- E-mail message from Nick Costas, sent July 30, 2014, 1:18 AM
- E-mail message from cestnepaunemail@yahoo.com, sent August 19, 2014 11:39 PM
- Written testimony of Patricia Rosi in support of adding OCD as a qualifying condition under the MMP, August 6, 2014
- Transcript of the Public Hearing to Add Obsessive Compulsive Disorder to the list of debilitating medical conditions that may be treated with the medical use or marijuana, held on August 6, 2014
- Briefing Memorandum Associated with Petition to Add Debilitating Condition, dated November 6, 2014, by Kenneth Albert, Director, DLRS

Although the evidence in this matter may be suggestive that medical marijuana could be beneficial for or effective in the treatment of patients with obsessive compulsive disorder (OCD), the evidence does not sufficiently demonstrate that medical marijuana would be beneficial or effective. The evidence does not include any published data on the efficacy of medical marijuana for OCD; there was only one small case report regarding the use of synthetic cannabinoid not marijuana. The evidence does not include any randomized clinical trials as would typically be required before approval of any other medical treatment. And the evidence also does not include any safety data regarding the use of medical marijuana. Finally, there is

published literature that indicates that the persistent use of marijuana is associated with neuropsychological decline.

Therefore the Public Petition to add Obsessive-Compulsive Disorder (OCD) to the list of debilitating conditions for the medical use of marijuana is DENIED.

DATE: 12/3/14

SIGNED:

MARY C. MAYHEW, COMMISSIONER

DEPARTMENT OF HEALTH and HUMAN SERVICES